



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
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STATE OF HAWAII
STATE ETHICS COMMISSION


LOBBYIST REGISTRATION FORM

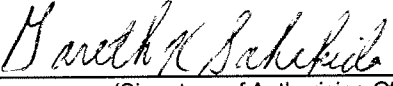
(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Okimoto	Alan	Susumu	833-6628
MAILING ADDRESS (Street)			FAX
2850 Paa Street, Suite 204			833-8486
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96819	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)			(State)
(Zip Code)			

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaii Transportation Association	833-6628
MAILING ADDRESS (Street)	FAX
2850 Paa Street, Suite 204	833-8486
(City)	(State)
(Zip Code)	
Honolulu	Hawaii
96819	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Lynn Shimizu	833-6628
MAILING ADDRESS (Street)	FAX
2850 Paa Street, Suite 204	833-8486
(City)	(State)
(Zip Code)	
Honolulu	Hawaii
96819	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY							
	Agriculture		Education		Human Services	X	Science, Technology & Economic Development
X	Communications & Public Utilities	X	Government Operations & Finance	X	Intergovernmental Relations, International Affairs	X	Tourism & Recreation
X	Consumer Protection & Commerce		Hawaiian Affairs	X	Labor & Employment	X	Transportation
	Culture, Arts, Historic Preservation		Health	X	Planning, Land & Water Use Management		Other: (indicate below)
X	Ecology, Energy Environmental Protection		Housing		Public Safety & Corrections		

PART IV CERTIFICATION OF LOBBYIST	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.	
	January 4, 2007
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY	
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Gareth K. Sakakida	Managing Director
NAME OF ORGANIZATION (if applicable)	TELEPHONE
Hawaii Transportation Association	833-6628
MAILING ADDRESS (Street)	FAX
2850 Paa Street, Suite 204	833-8486
(City)	(State)
Honolulu	Hawaii
	(Zip Code)
	96819
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.	
	January 5, 2007
(Signature of Authorizing Officer or Person Represented)	(Date)